AUTHORIZATION FOR CRIMINAL BACKGROUND CHECK

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By signing this form, I authorize the Utah Bureau of Utah Division of Wildlife Resources, 1594 West Not access and review state and federal criminal history determine whether I have been convicted of, or are bears upon my fitness to be employed or volunteer vulnerable adults or persons with disabilities and contity.	orth Temple, Salt Lake City, Utah, to records and make reasonable efforts to under pending indictment for a crime that for a position of trust over children,	
I do hereby release Utah BCI, the Division of Wildlife Resources, all persons, organizations, or government agencies, for any damages of, or resulting from furnishing such information.		
I have read and understood the foregoing and my certification is true and correct to the best of my knowledge and belief, and that I am at least 18 years of age.		
Signature	Date	
Division of Wildlife Resources' Representative	Date	

THIS FORM MUST BE COMPLETELY FILLED OUT This Background is only good for three (3) years per Hunter Education Policy

NAME:			
LAST	FIRST	MIDDLE	=
FORMERLY USED LAST N	AMES		
DOB:	_ Social Security:	DL # / State:	
Address:	City	State/Zip	
Telephone: (H)	; (W)	; (C)	
Position Volunteering For	:		
Dedicated Hunter COR #	Conceal	ed Firearms Permit #	
Email address:			